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APPROVAL OF UNDP ASSISTANCE TO A PROJECT OF
BRAZIL

IPF:(1992-96) $14 183 000

(BRA/92/001) - Prevention and Control of Sexually Transmitted Diseases and AIDS

Date of approval by the AC:[1/]	11 August 1993
Expected duration:	Eighteen months
Proposed executing agency:	Government
Government implementing agency:	Ministry of Health
Government cost sharing:	$ 17 471 000
Total UNDP budget:	$ 17 471 000

Project background

AIDS first appeared in Brazil in 1983, about two years after emerging in developed countries. Since then, and until December 1992, 33,938 cases have been reported, reaching all Units of the Federation and placing the country in the fourth rank in the world in total number of cases. Prevalence rate per 100,000 inhabitants has increased from 0.005 in 1982 to 25.5 in 1992; and a decrease in the male/female ratio has occurred from 121.1 in 1984 to 7.1 in 1992. Based on a prevalence rate of 425,000 individuals already infected with HIV, it is estimated that there will be 87,000 new AIDS cases during 1993-1995 period. For a prevalence rate of only 280,000 HIV infected individuals, the number of new cases will drop to 57,000. The most pessimistic forecast estimates that, during the same period, 85,000 individuals will die from AIDS, whereas the most optimistic view estimates the number of AIDS-related deaths at 56,000.

Some recent studies on the economic impact of the epidemic, indicate a health care cost of (US)$16,700 per patient/year in Brazil (excluding the cost of drugs such as AZT) and that 70 per cent of cases fall within the economically active age bracket. The Brazilian Government is aware of the magnitude and negative impact that the AIDS epidemic may have both in the welfare of the population as well as in the Brazilian economy and is firmly determined to decrease the rate of expansion of HIV infection and to enhance the efficiency of health care for AIDS patients. It is considered that the major gaps in the battle against AIDS in Brazil result from a lack of effective information, education and communication (IEC) actions; the high price, limited availability and poor quality of condoms; the lack of reliable data and effective mechanisms for the follow up and evaluation of HIV/AIDS prevention and control activities; the scarcity of resources made available to the sectors working with this problem; and the recentness of the interinstitutional integration process

[1/] This Fact Sheet reflects the status of the project/revision at the time it was approved by the Action Committee; modifications to the project/revision may have occurred subsequently.

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